

# 2010 Rocky Mountain Expo Denver Prospect Fair & TechnoFest RMAG/DAPL/DGS/IPAMS/SPE

Colorado Convention Center, Denver, Colorado  
Friday, November 5, 2010

## DAY OF EVENT BROCHURE—ADVERTISING APPLICATION

The DAPL, RMAG, DGS, IPAMS and SPE are accepting advertising for the event brochure/directory that will be published for the upcoming 2010 Denver Prospect Fair & TechnoFest and provided to each attendee.

Only black and white, ads will be accepted. Ads should be sent as jpeg or tiff files. Simple line art and photographs provide helpful illustration. A border is recommended for advertisements that comprise the space of one-half page or less. Professional cards will be reduced to one column width, no vertical cards. Deadline for publication is **October 16th, 2010**. (Note-Inside front cover and inside and outside back covers are available. Inside front: **\$625**, Inside back **\$500**, and Outside back **\$750**. Please complete this form and return to the RMAG Office, 910 16th Street, Suite 1125, Denver, CO 80202. Voice: (303) 573-8621. Fax: (303) 628-0546. E-mail: [RMAGdenver@aol.com](mailto:RMAGdenver@aol.com). All advertising applications must be accompanied by payment and digital copy of advertisement.

| No. of Ads | Advertisement Sizes | Width x Depth   | Cost per Ad | Total Cost |
|------------|---------------------|-----------------|-------------|------------|
|            | Full Page           | 7-1/2" x 9-1/4" | \$400       |            |
|            | One-half Page       | 7-1/2" x 4-7/8" | \$250       |            |
|            | One-quarter Page    | 3-3/4" x 4-7/8" | \$150       |            |
|            | Professional Card   | 2-1/4" x 1-1/4" | \$50        |            |

### Advertiser Recognition

- Listing in the Event Directory.
- Post-event recognition in the local publications of the five associations organizing the event.

In addition, you will also receive the heartfelt thanks of your Denver area oil & gas professional societies.

Name \_\_\_\_\_ Title \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

To pay by check, complete the requested information and mail to the RMAG Office at the above address. To pay by credit card, complete the requested information and mail or fax to the RMAG Office at the above address, or fax to 303-628-0546.

#### Credit Card Information (VISA and MasterCard only)

Card # \_\_\_\_\_ Exp \_\_\_\_\_ Billing Address Zip Code \_\_\_\_\_

Name on card (Print) \_\_\_\_\_ Signature \_\_\_\_\_